



## STONY CREEK ELEMENTARY SCHOOL

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### *ABSENCE NOTE*

STUDENT'S NAME \_\_\_\_\_

DATE(S) OF ABSENCE: \_\_\_\_\_

TEACHER \_\_\_\_\_

REASON FOR ABSENCE (Check Appropriate Box):

- ☐ Illness
- ☐ Doctor's Appointment
- ☐ Family Travel (Please attach a detailed letter for Principal's Review/Approval.)
- ☐ Other: \_\_\_\_\_.

ADDITIONAL INFORMATION:

PARENT SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_